

City of Rochester Building Safety Department 2122 Campus Dr SE, Suite 300

Rochester MN 55904-4744 Phone: (507) 328-2600

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PLUMBING Permit Application

	Office Use Only	(3/05)
App. No.		

Date		Building Permit Application No. (If this work is associated with a building permit)				
Tenant/Building Na	me					
Site Address	lumber	Street			Sui	te/Unit No.
	Subdivision and/or Addition		Block	Lot	Plat	Parcel
Applicant is: • Own	er • Contractor • Other ((describe)				
Property Owner	Name Last Address	First	1	Phone ()	
	City		State	Zip Code	•	
Contractor	Company Phone	Fax -	. F.	Roch. Co -mail		
	Name Last Address	First		MN Mast		
	City	:	State	Zip Code	•	
Work Category (check one)	NewAddition	AlterationsTenant Fire			ove/Relocate epair/Replace	ment
Permit Type	Residential	Commerc	al			
Project Description	Description of Work					
Valuation of Work	Total Valuation of Work \$			(Materials and	d Labor)	
Permit Fees	1. Application Fee \$ 25 2. Permit Fee* 3. State Surcharge (.0005 X valuation) • Charge Total Fees Total of #1, 2 and 3 above	Valuation \$1 to \$500 \$501 to \$1	,000 \$10.00		Method of P	,

Fixtures Provide total number of each fixture indicated.	Bathtub Clothes Washer Dishwasher Drinking Fountain Floor Drain Laundry Tray Lavatory Lawn Sprinkler Pot & Scullery Sink	RPZ Backflow Preventer Sewer Ejector Shower Stall Sink Sump Pump Urinal Water Closet Water Heater Water Softener Other
Water/ Sewer Information	City WaterCity SewerBuilding Main Water Supply Size	WellSeptic

I hereby apply for a plumbing permit and I certify that the information above is complete and accurate. The work will be in conformance with applicable laws of the State of Minnesota and ordinances of the City of Rochester, including City Sales and Use Tax Ordinance 129.25. I understand this is not a permit but only an application for a permit, and work is not to start without a permit. I certify that the work will be in accordance with all permit conditions and approved plans (in the case of work which requires a review and approval of plans).

I hereby certify that I am properly registered and/or licensed as required by the State of Minnesota and/or the City of Rochester. Anyone not so licensed may do work on premises or that part of premises (not containing more than two units) owned and actually occupied by the worker as a residence.

Applicant's Signature

Date